

FINANCIAL AFFIDAVIT			
IN UNITED STATES IN THE CASE	MAGISTRATE	DISTRICT	<input type="checkbox"/> APPEALS COURT or <input type="checkbox"/> OTHER PANEL (Specify below)
USA	V.S.	FOR	<div style="border: 1px solid black; padding: 5px;">LOCATION NUMBER</div> <div style="border: 1px solid black; padding: 5px;">DOCKET NUMBERS</div> <div style="border: 1px solid black; padding: 5px;">Magistrate</div> <div style="border: 1px solid black; padding: 5px;">District Court</div> <div style="border: 1px solid black; padding: 5px;">Court of Appeals</div>
Thomas Scola		AT	
PERSON REPRESENTED (Show your full name)		<div style="display: flex; justify-content: space-between;"> <div> 1 Defendant--Adult 2 Defendant - Juvenile 3 Appellant 4 Probation Violator 5 Parole Violator 6 <input type="checkbox"/> Habeas Petitioner 7 <input type="checkbox"/> 2255 Petitioner 8 <input type="checkbox"/> Material Witness 9 <input type="checkbox"/> Other </div> <div style="border: 1px solid black; padding: 5px;"> DOCKET NUMBERS Magistrate District Court Court of Appeals </div> </div>	
CHARGE/OFFENSE (describe if applicable & check box →)		<input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor	

ASSETS	EMPLOYMENT	Are you now <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Am Self-Employed Name and address of employer: _____ IF YES, how much do you earn per month? \$ _____ IF NO, give month and year of last employment <u>2003</u> How much did you earn per month? \$ <u>unknown</u>													
	OTHER INCOME	If married is your Spouse employed? <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, how much does your Spouse earn per month? \$ <u>N/A</u> If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$ _____													
	CASH	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY THE SOURCES <u>Cannot answer - assert rights under Fifth Amendment to remain silent</u>													
	PROPERTY	Have you any cash on hand or money in savings or checking accounts? <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, state total amount \$ <u>3,000</u> Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, GIVE THE VALUE AND \$ DESCRIBE IT <u>Michigan Jail</u>													
OBLIGATIONS & DEBTS	DEPENDENTS	MARITAL STATUS <input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED OR DIVORCED	Total No. of Dependents <u>1</u>	List persons you actually support and your relationship to them <u>7 year old boy, lives with paternal grandparents</u>											
	DEBTS & MONTHLY BILLS (LIST ALL CREDITORS, INCLUDING BANKS, LOAN COMPANIES, CREDIT ACCOUNTS, ETC.)	APARTMENT OR HOME: Creditors Total Debt Monthly Paymt.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 25%; text-align: right;">\$</td> <td style="width: 25%; text-align: right;">\$</td> </tr> <tr><td></td><td style="text-align: right;">\$</td><td style="text-align: right;">\$</td></tr> <tr><td></td><td style="text-align: right;">\$</td><td style="text-align: right;">\$</td></tr> <tr><td></td><td style="text-align: right;">\$</td><td style="text-align: right;">\$</td></tr> </table>			\$	\$		\$	\$		\$	\$		\$
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I certify under penalty of perjury that the foregoing is true and correct. Executed on (date) 4/10/04

SIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED)

Thomas Scola